

Cullison assumes command of NMCP

By Deborah Kallgren

Rear Adm. Thomas R. Cullison assumed command of Naval Medical Center Portsmouth Dec. 30 in a change of command ceremony held in the NMCP auditorium. Cullison relieved Rear. Adm. Thomas K. Burkhard who has commanded the medical center since November 2002.

Cullison is the 70th commander of the medical center., and is now commander of Navy Medicine East, an Echelon 3 Command. (Navy Medicine East includes 15 Navy Military Treatment Facilities on the East Coast, Gulf Coast, Great Lakes and in Europe: Naval Medical Center Portsmouth, Naval Hospital Pensacola, Naval Hospital Jacksonville, Naval Hospital Corpus Christi, Naval Hospital Beaufort, Naval Hospital Charleston, Naval Hospital Cherry Point, Naval Hospital Camp Lejeune, Naval Hospital Great Lakes, Naval Health Care New England, Naval Hospital Sigonella, Naval Hospital Guantanamo Bay, Naval Hospital Naples, Naval Hospital Rota and Naval Hospital Keflavic.)

Burkhard's next assignment will be Command Surgeon, United States Pacific Command.

Cullison previously served as NMCP's deputy commander from 1995 to 1998. He most recently

served as The Medical Officer of the Marine Corps. A native of Plymouth, Ind., Cullison joined the Navy and served as a surface line officer on *USS Charles R. Ware (DD 865)*, participating in riverine salvage operations in Vietnam with Harbor Clearance Unit One. He later received his doctor of medicine degree from Indiana University School of Medicine, and is an orthopedic surgeon.

Naval Medical Center Portsmouth, the Navy's "First and Finest" hospital, has served the health care and medical needs of the nation's military continuously since 1830.**



Rear Adm. Thomas R. Cullison assumed command of Naval Medical Center Portsmouth and Navy Medicine East in a change of command ceremony held Dec. 30 at NMCP.



Congratulations new and promoted petty officers

Congratulations Third Class Petty Officers



HM3 Emil Agas HM3 Alejandra Aguilar Sanchez HM3 Adrian Aguierre HM3 Omowale Ajayi HM3 Rasheda Anderson HM3 Alicia Ashmon **HM3 Sarah Bailes HM3** Amber Barnes **HM3 Christina Barnes** HM3 Ivan Beauchamps HM3 Stephen Bissett HM3 Earl Blake HM3 Jeremy Brown HM3 Crystal Bullock HM3 Andrew Burdette HM3 Geetanjalie Burns **HM3 Tomas Camblor** HM3 Michael Cannon HM3 Jennifer Carlson HM3 Carlos Carrasquillo HM3 Paulen Coakley HM3 Gwendolyn Collver HM3 Marcia Correia HM3 David Crittenden **HM3 Brittany Davis HM3 Bryan Davis** HM3 Nevilin Davis HM3 Maile Elkins HM3 Amber Ellison

HM3 Michelle Evans HM3 Rory Farrell HM3 Laurel Flherty HM3 Clarence Fowlkes HM3 Renae Franson HM3 Glenn Gagarin **HM3 Mary Godinez** IT3 Wanye Golding HM3 Leiman Gonzalez HM3 Jeffery Gore **HM3** Benjamin Graves HM3 Andrew Gravesande **HM3 James Harness** HM3 Yves Henry **HM3 Yvonne Hercules** HM3 Lazara Hernandez HM3 Silvana Hernandez HM3 Blair Hildebrand HM3 Eric Huff HM3 Crystal Jackson HM3 Tori Jackson HM3 Wakisha Jackson HM3 Kimberly Jirak HM3 Michelle Joers HM3 Raymond Jordan HM3 Tiffany Kidd HM3 Danail Koupenov HM3 James Lee HM3 Latonya Lewis CS3 Robert Lopez YN3 Rachel Low HM3 Minhkhoi Lv HM3 Raquel Macarthur HM3 Bethany Mack HM3 Michelle Mansfield HM3 Erica Martin HM3 Steven Martinez HM3 John Mckinley **HM3** Timothy Meyer HM3 Justina Mitchell

HM3 Vincent Montova HM3 Jatiela Moore HM3 Kenneth Moore HM3 Johnny Morissaint HM3 Lonetta Odom HM3 Patricia Opoku-Amoabeng HM3 Michael Pascua CS3 Kenyatta Pore HM3 Angela Ray **HM3 Dominica Santos** HM3 Rebecca Specht **Dk3** George Stores HM3 Crystal Storm HM3 Lizzy Sulton HM3 Bethany Sutton HM3 Felicia Taylor HM3 Jennifer Vaillancourt HM3 Claudia Washington **HM3 Brendon Watts** HM3 Natarsha Williams **HM3 Ruth Williams** HM3 Shamikka Williams HM3 Teva Williams HM3 Kendra Woods

Second Class Petty Officer



HM2 Emmanuel Amponsah
HM2 Michael Baidas
HM2 Catherine BaneyVuocolo
FC2 James Barnes
HM2 Benjamin Bernhardt
HM2 Tramaine Brown
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The Courier

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Commander

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Rear Adm. Thomas K. Burkhard

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This publication provides an avenue to circulate all useful information the NMC Portsmouth staff has to offer. Submissions are welcome. Contact the Public Affairs Office by calling 953-7986, by fax at 953-5118, or by emailing the PAO, Deborah Kallgren, at drkallgren@mar.med.navy.mil. Submissions should be on disk in text or Word format with a paper copy attached. Photos should be a separate submission from the document and in jpeg, bitmap or tiff format. Submissions will be placed in the next issue space permitting. PAO is located in Building One, Third Deck, Rm. 311.

2006 welcomes first baby born at NMCP

Naval Medical Center Portsmouth welcomed the first NMCP baby born in the New Year at 12:13 a.m. Jan. 1. Maceo L. Reece, daughter of Lattrieace and Marcus Reese, weighed 8 lbs., 2.5 oz. and measured 19 inches in length. Marcus is stationed on board USS Kearsarge (LHD 3) and works for the ship's Aircraft Intermediate Maintenance Department. "I didn't think I was going to have him right on New Years," Lattrieace said. "It was exciting. He was supposed to be a she. The whole nine months I thought I was having a girl."



Perioperative nursing; celebrating a calling

By JO1 Sarah Langdon

The second week in November has been set aside to recognize the contributions of perioperative nurses across the U.S. This year, Perioperative Nurses Week, which highlights the history, current opportunities and future challenges of perioperative nursing, was celebrated Nov. 13-19.

Perioperative nurses provide nursing care to patients before, during and after their operations. According to AORN, the Association of Operating Room Nurses, they act as a member of the surgical team, which may include the surgeon, circulating nurse, anesthesia provider, surgical assistant and assistant personnel. Perioperative nurses provide nursing care preoperatively, intraoperatively and post-operatively.

"The perioperative nurse plans and directs nursing care for patients

undergoing operative and other invasive procedures," said Lt. Johnny Rodgers, NMCP Main OR. "Perioperative RNs work in all types of health care facilities such as hospitals, ambulatory or

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Lt. Mike Finkbone (upper right), perioperative nurse, conducts a preoperative interview with a pediatric patient prior to the patient's surgery.

Frocking List (cont'd)

HM2 Harold Butac HM2 Adrian Cassanova **HM2** Emmanuel Chenny HM2 Karl Daley MA2 Yvonne Dilley HM2 Jerami Flinn HM2 Patrick Floyd HM2 Anthony Fratta SH2 Stephanie Gomez HM2 Anna Riza Gouge HM2 Christina Guthrie HM2 Kenneth Koehler HM2 Jonathan Matthews **HM2** Christopher Morris HM2 David Nadermann **HM2** Carlos Oquendo SK2 Lawrence Oyelami HM2 Monique Plummer HM2 Kevin Ramdass **HM2** Brian Reynolds

HM2 Matthew Riley HM2 Leah Sticka HM2 Melissa Van Dyke HM2 Robert Wilson

First Class Petty Officer



HM1 Daniel Atwell HM1 Charles Balo HM1 Desiree Barlow HM1 Daniel Benton HM1 Nyobi Brogdon HM1 Shanda Coates HM1 Amy Conklin HM1 Teresa Crawford HM1 William Dalton HM1 Benjamin Debblay HM1 Kendra Franks HM1 Eric Green HM1 Eileen Harris HM1 Kelly Henderson HM1 John Huffaker HM1 Jeremy Jordan HM1 Dicky Lasksono HM1 Melissa Leonard HM1 Steven Maier HM1 Joshua Nickols HM1 George Odum HM1 Danny Oligo HM1 Joseph Pascual HM1 Brian Reynolds IT1 Jamone Robinson HM1 Dorenda Smith HM1 Pattie Smith HM1 Rondell Terrell HM1 Anthony Veverka HM1 Emanuel Waddell HM1 Alvin Yabut

NMCP on board with computerized patient records

Bank financial records are computerized. Billions of dollars travel electronically every day. A full automobile maintenance history is available with a few strokes of a computer keyboard. Tax returns are filed on the Web and stored centrally. Still, Military Health System medical records are still a hodge-podge of paper forms and reports thrown together in a folder and carted manually from location to location. These records can be lost, stolen, damaged, incomplete or unavailable during critical periods. Fortunately, this cumbersome record system is on the verge of extinction, as the MHS evolves from its old pen and paper ways into the electronic age. AHLTA, a complete computer-based patient record is coming to Naval Medical Center Portsmouth and its branch clinics in January 2006.

The Department of Defense rollout of this program supports President Bush's April 2004 Executive Order calling for "widespread adoption interoperable electronic medical records within 10 years." When fully deployed, AHLTA will impact more than 9 million beneficiaries at 70 military hospitals, 411 medical clinics and 417 dental clinics. In a typical week, AHLTA will support 2.1 million prescriptions, 1.8 million outpatient encounters, 400,000 dental procedures, 19,500 inpatient admissions and 2,000 births.

There are many advantages of electronic medical records over paper-based systems. The records are standardized, legible, more detailed and available 24/7. They support quality control and patient safety. Interoperability ensures that costly tests, labs and scans are not

needlessly duplicated. Electronic records are secure in that only authorized users can access the system. They are protected from disasters by extensive backup mechanisms. Best of all, they will be accessible at any military treatment facility in the world. A real life of AHLTA was documented recently when 25 hospitalized patients and 31 mothers-to-be were forced to flee from Hurricane Katrina without their medical records. Health care providers hundreds of miles away were able to access their electronic medical records and provide the patients with continuity of care.

In preparation for AHLTA, NMCP has deployed more than 593 computers and 155 printers. More than 1,650 doctors, nurses, corpsmen and front desk personnel

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Rolling Thunder plays Santa for NMCP

The Rolling Thunder, a local motorcycle club, visited Naval Medical Center Portsmouth Dec. 10 for the annual Operation Brite Lite. Every year, members of the club visit the medical center to distribute toys to children admitted to the hospital. The Rolling Thunder relies on donations from the Hampton Roads community. This year more than 50 motorcyclists brought 75 to 100 toys for distribution at NMCP.

Photos submitted by Tanya Morgan, American Red Cross











SPRINT team deploys in support of Hurricane Relief

By Cmdr. Edward Simmer, NMCP

fter Hurricane Katrina ravaged New Orleans and the Mississippi Gulf Coast, the Naval Medical Center Portsmouth Special Psychiatric Rapid Intervention Team (SPRINT) was deployed to the area. The team is made up of psychiatrists, psychologists, psychiatric nurses, social workers, chaplains, psychiatric technicians and religious program specialists. It is designed to be worldwide deployable on 24 hours (or less) notice, and its mission is to provide mental health support to groups of people after a traumatic event.

Hurricane Katrina severely damaged or destroyed the homes of many active duty Navy personnel and civilian employees of the Navy. With many Navy personnel and their families still living in shelters, the first five members of the team flew to NAS Pensacola on Sept. 3, and then rode a search and rescue helicopter to NCB, Gulfport, Miss. During the helo ride, the SPRINT team received a first-hand look at the extent and severity of the devastation. Once in Gulfport, the team lived and worked in the Navy shelter there, helping those living in the shelter.

The team also worked with the many Navy, Army, Coast Guard and National Guard troops who were deployed to the area. As many of these units were involved in the search for survivors and debris removal, they too faced significant stress. The team subsequently worked with Navy personnel and their families at Naval Station, Pascagoula, Miss., and the Stennis NASA Base as well.

On Sept. 7, six additional members of the team were mobilized and half of the team flew to New Orleans, which was still mostly flooded. In New Orleans, the team initially lived in a Health Promotion Clinic at NSA New Orleans, which by then was a staging point for Army and National Guard troops. The team worked with the crew of the USS Tortuga (LSD 46), which sent small boats into the flooded streets of the city to find stranded people and pets. The ship set up "Camp Milo and Otis", a makeshift kennel for rescued pets. Taking care of the pets was popular duty, and all of the animals were adopted or reunited with their owners before the ship left.

The team eventually moved to NAS/JRB New Orleans and from there worked throughout the city (by then mostly "dewatered"), supporting

not only Navy personnel, but also the many National Guard units located in the city. The teams in both Mississippi and New Orleans worked one-on-one with individuals and in groups. Most of this work was done in the field, taking service to the deployed units where and when they needed them.

While the hours were long, the team did find time for a little recreation. The Mississippi team visited the rescued dolphins after they were moved into the Gulfport shelter after their aquarium was destroyed. The New Orleans SPRINT team also had the opportunity to get up close and personal with a pair of elephants, courtesy of the zoo's staff, while working with National Guard troops stationed at the

By the end of September, most of the deployed troops had returned home, and local mental health resources were starting to come back on line. As a result, the team returned home on Sept. 30 after making contact with more than 15,000 people. The team returned tired but aware that it had made a difference.

Dependent Scholarship Enrollment Coming Soon!

Enrollment is now open for several scholarship/grants available to dependent children of active and retired service members. Enrollment for the Vice Admiral E.P. Travers Scholarship and Loan Program, Dependent Children of Deceased Service Members Scholarship Program and USS TENNESEE Scholarship Fund begins March 1. Enrollment for the Admiral Mike Boorda Scholarship Program begins May 1. For information, instructions and applications, please visit the Navy Marine Corps Relief Society Web site at www.nmcrs.org/education or contact the Director, Education Programs at (703) 696-4960.

MWR hosts annual Holiday Party

Naval Medical Center Portsmouth hosted the annual Staff Holiday Party Dec. 17 in the command galley. With help from Nutrition Department, the command CSs, and numerous volunteers, including the Front Office Staff and CMCDM (FMF/DV/PJ) Chris Angstead, the NMCP Morale, Welfare and Recreation Department provided a feast for the crew.

NMCP's Command Heritage Committee provided table displays highlighting winter and seasonal celebrations around the world, and serenaded the diners with Christmas carols throughtout the party.

Deputy Commander Capt. C. Forrest Faison recognized winners of the command decorating contest.











Photos by HN Charles Hollingsworth

NMCP gets in the holiday spirit

















The halls of Naval Medical Center Portsmouth were abound with festive displays celebrating the holiday season. Wards,

clinics and administrative offices alike adorned their spaces with Christmas trees, elaborate scenes and plenty of snow and light. The 2005 winners for best holiday decorations were: 1st place, Ward 4H; 2nd place, Director for Resources, and 3rd place, Urology Clinic. Photos by HN Charles Hollingsworth

TPC Va. Beach Eye Clinic receives award

The Annual Hampton Roads **Appointment** Center Recognition Award for Specialty Care Clinics was presented to TPC Virginia Beach Optometry Clinic Dec. 3. The clinic's teamwork enabled the appointment center to schedule 74 percent of all TRICARE appointments for their clinic. Col. Lisa Chisholm, right, presents a Certificate of Recognition signed by the Senior Multi-Market Director, Rear Adm. Thomas K. Burkhard, to Cmdr.



Charlene Darrow, Officer in Charge and the clinic staff. The appointment center is located in Building 3, NMCP, and schedules TRICARE appointments for NMCP, Fort Eustis, Langley Air Force Base and Fort Lee.

Runners brave cold for holiday Hog Run





Runners take off from the starting line at the annual Hog Run, a 1.5 mile run sponsored by Naval Medical Center Portsmouth's Morale, Welfare and Recreation Department. This year's winners received bake hams and gift cards. More than 20 participants came out for the event.



Photos by HM2 Dominick Sestito, Command Fitness

Chaplain's Corner

'A Picture of Hope'

By Lt. Cmdr. Paul Witt, CHC, USNR

The halls at Naval Medical Center Portsmouth are lined with large, framed photographs taken around the world. They are pictures of peace and tranquility gardens with many flowers with various colors, parks with lakes that gleam in the sunshine, village houses that line the cliffs along Italy's shores. In the haste to get from one place to the next, patients and staff often pass by the pictures without stopping to admire them. The beauty is still there in each frame yet our minds are detracted with hurts, suffering and responsibilities. It isn't until we refocus our attention that we are able to see the peace and tranquility the pictures have to offer. It is when we refocus that we are able to fill our souls with pictures of serenity.

The holidays are a time of refocusing as well. In our haste, we can easily miss the meaning in the message of the season. There is so much beauty and joy in the season. Family gatherings, holiday lights and warm apple cider while watching the children opening their gifts are just a few of the things that fill us with joy. But most of all, the season is a reminder of hope, hope for a hurting world.

The holidays remind us there is something more to this life, something greater than ourselves, something of beauty and eternity. Christmas remind us that our hope isn't in ourselves, it's in our God. A God who answers the prayers of those in need, a God who comes

to the aid of His people, a God who quenches spiritual thirst and those who are emotionally frail. God is the one who fills our hearts with hope. The holidays bring the clarity of hope to the world.

Several of my deployments have been over Christmas and I've been far from home. It was difficult to be away for so long and I missed celebrating with my family, however, the distance also helped. It helped me to focus on the reason for the season. The meaning of Christmas became clear as the distractions diminished. The baby didn't get lost in the wrapping. Jesus' birth was a sign of hope for all people. As the Angel proclaimed so long ago, "Do not be afraid. I bring you good news of great joy that will be for all the people. Today in the town of David a Savior has been born to you; he is Christ the Lord. This will be a sign to you: You will find a baby wrapped in cloths and lying in a manger."

God's hope is something we can share. Whether emotional, physical, or spiritual, God desires for us to pass His hope to others. We share his hope when we reach out to the poor, homeless or lost. Speaking words of encouragement, giving comfort to the suffering, healing the wounds of brokenness by pointing to a brighter tomorrow are simple ways to share God's hope.

Hope helps us face tragedy, heartache and pain because we know tomorrow things will be different. Hope is the difference between falling short and following through, the difference between giving up and going on. This season take time from the distractions, unwrap the hope of Christ, and enjoy the scenery.

Perioperative Nursing

Continued from page 3

outpatient surgery centers and physician offices."

One function of the perioperative nurse is that of the circulator. The circulating nurse performs his or her duties outside the surgical field, Rodgers explained.

"The circulator is responsible for managing the nursing care of the patient within the OR and coordinating the needs of the surgical team with the other care providers necessary for the completion of surgery," he said. "In the operating room, most patients are anesthetized or sedated and are powerless to make decisions on their own behalf during the intra-operative phase. The circulating nurse serves as the patient advocate while the patient is least able to care for him or herself.

"We are the eyes and ears for the patient during surgery," Rodgers said. "The patient is unconscious

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Perioperative nursing; challenging yet rewarding

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and cannot communicate with the nurse. It's our job to be aware of the patient's surroundings for safety and well being. All other areas of nursing the patient can communicate needs and concerns, or a family member is there for anticipating the teams needs. We are the extra hands for the anesthesia provider and when difficulties arise, we are there to assist until another provider arrives."

"(Perioperative nursing) is very challenging, but very

rewarding," said Lt. Michelle Ortiz, NMCP Main OR. "(It) has been good to me and I would do it again. Every day is a new challenge ... you never get bored."

According to Penny McGranaghan, RN, the most important part of her job is representing the patient.

"(The perioperative nurse) treates the patient and family like they are a member of our family, said Cmdr. Maureen Butler. "She or he knows the rules of the surgery process and sticks by

them. It is an instant reward when you wheel the patient out into the recovery room and they are all 'fixed up'."

Perioperative nurses provide care to a patient who has turned his life over to the surgical team, Rogers said.

"We all play a vital role and depend on each other to provide the best patient care possible," Rodgers said. "Whether it's here in a modern facility or on the front lines in Iraq, our roles are the same."

AWOL- Getting High Without Liquid

Submitted by HM1 Eduardo Ortiz, Command DAPA

If you hear your Sailors talking about going AWOL, you should ask a couple questions before you contact the master-at-arms. AWOL is the latest acronym for an emerging drinking fad called Alcohol With Out Liquid. AWOL machines combine hard liquor with oxygen to produce a mist, which the user then inhales using a device that looks very similar to the device used by people with asthma. It is reported that the user feels the same effects of inebriation as

drinking alcohol without the hangover effects of liquid alcohol.

AWOL machine distributors market their machines as a low-calorie, low carbohydrate alternative to liquid alcohol, making it appear very appealing to those that are weight conscious. The machines are also advertised as having a "safety" feature, which prohibits the user from inhaling a one-half ounce amount of liquor in less than 20 minutes, allaying the fears that users will become intoxicated quickly.

Several jurisdictions (including Suffolk County, N.Y., and Lansing, Mich.) have already passed or are drafting legislation to prohibit the sale, possession and use of AWOL machines. Educate your Sailors about this device and make sure that they consume alcohol responsibly (in whatever form they choose) and never drink and drive. Develop a responsible plan and stick to it before drinking starts - "Know before you go". *

AHLTA payoff expected to be high

Continued from page 2

will be trained from January to May. Implementing a computer system as sophisticated as AHLTA is not easy. The learning curve for health care providers is steep. In order to allow time for the staff to gain proficiency on the system, appointment schedules will be adjusted. No acute need will go unmet, but access to routine appointments may take a little longer during the transition to AHLTA. The payoff will be a vastly

improved and safer MHS medical records system.

For more information, log on to the NMCP Internet page, wwwnmcp.mar.med.navy.mil, and click on the "AHLTA" icon **

Bravo Zulu!!!

Navy Achievement Medal

HMCS(SW) Stephen A. Murray Lt. Robert L. Smits, Jr. Lt. Timothy F. Ayers HM2Laura L. Rodriguez-Calderon HM3 Jung Q. He HM2 Eric M. Elizee HM1 Janet S. Ramos HM2ChristopherRobbins HM2 Eric L. Allen Lt. Arthur M. Schueler HM2 William R.O'Connell Lt.j.g Joanna T. Johnson HM1(SW/AW) Eric R. Jackson Lt. Cmdr. Cary T. Schultz HM3(SW) Jennifer N. Hernandez HM1(SW) James D. Evans, Jr. CS3 Christopher B. Atwell SK1(SW) Michael D. Wills HM3(FMF) Dave E. Wysk HM3Lillian A. Ramirez DT3 Anna T. Gouge Lt.j.g. Lathesha Holt HM3(FMF) Trevor J. Trout Lt. Kuturah J. Harris Lt.j.g. Jennifer M. Brooks HM3 Saleena J. Jennifer Lt.j.g. Monica A. Toney

Navy Commendation Medal

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HM2 Jerry L. Wilson
ENC(SW) Wanda S. Gonzalez
HM1(FMF) Marsell A. Brown
Lt. Cmdr. Karl A. Lindblad
Cmdr. Thomas A Craig
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HM1(AW/SW) Judy K. Tarpley
Cmdr. Kristen C. Zeller
Lt. Jason M. Jones
HM1(SW) John R. Caole
Lt. Cmdr. Michael G. Sampson, Sr.
Lt. Wilber C. Delorme
HMC(SW/FMF) Wayne P. Rudolph
HM1(AW/FMF) James C. Martini

PC2(SW) Fay M. Clay MAC(SW/AW) Russell S. Duncan HM3 Jennifer J. Saleena Cmdr. Jenifer L. Henderson

Letter of Commendation HNErin E. Erickson

CIV Deborah Harrell CIVILIAN OF THEQTR CIV Terrell Davis - CIVILIAN OF THE **QTR** HN(SW) Raven Thompson - BLUE **JACKET OF THE QTR** HM2(FMF) Jaslyn Y. Bushong – JUNIOR SAILOROFTHEQTR HM1(SW/AW/FMF)) Demarco L White-SAILOR OF THE QTR HM1 Jonathan H. Wells HM2(AW) Kenneth M. Goode HM2 Antoinette H. Peterson ANLakia L. Kenner RP1(SW) Christine K. Oestreich HM3 Serafin Maldonado MA2Kimberly S. Moselle HM3 Damon L. Scarlett

Letters of Appreciation HNPhillip J. Vandecoevering

HN Jessica L. Reed

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Operational Therapy Front Desk Team

Admiral Joel T. Boone Branch Health
Clinic Optometry Team
Healthcare Improvement Team
Occupational Audiology Team
Resource Management Directorate Team
Pharmacy Service Line Team
HN Justin K. Lambert
RPI Shelia M. Davis
HM3 Lacy J. Johnson
CIV Robert G. Honohan

Meritorious Service Medal

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Naval Meritorious Civilian Service Award

CIV Jacqueline Johnson CIV Zenaida T. Atienza CIV Cynthia L. Taylor

Certificate of Commendation

Lt.j.g. James A. Tamplen Lt.j.g. James J. Driscoll Cmdr. Sharon M. Wright

Certificate of Achievement

Psychology Department - FIRST AND FINEST

Continuing Education Certificate

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